DEPARTMENT OF JUSTICE NATURAL RESOURCE DAMAGE PROGRAM



STEVE BULLOCK ATTORNEY GENERAL

(406) 444-0205 (OFFICE) (406) 444-0236 (FAX) 1301 EAST LOCKEY AVENUE

'STATE OF MONTANA'

PO BOX 201425 HELENA, MONTANA 59620-1425

December 16, 2009

ţ.

Linda Jacobson US EPA Region 8 1595 Wynkoop St. Mail Code: 8ENF-RC Denver, CO 80202-1129

Julie DalSoglio US EPA Region 8 Federal Building 10 West 15th St., Suite 3200 Mail Code: 8MO Helena, MT 59626

RE: DEQ Permit Transfers

Dear Linda and Julie:

Enclosed is a disc containing a copy of ASARCO's notification of DEQ permit transfers, dated December 8, 2009.

Sincerely,

Mary Capdeville

Assistant Attorney General

Enclosure

BAKER BOTTS III

1500 SAN JACINTO CENTER ABU DHABI 98 SAN JACINTO BLVD. AUSTIN, TEXAS 78701-4078

AUSTIN BEIIING DALLAS DUBAI

TEL +1 512.322.2500 FAX +1 512.322.2501 www.bakerbotts.com

Aileen Hooks

TEL +1 512.322.2616 FAX +1 512.322.8314

aileen.hooks@bakerbotts.com

HONG KONG HOUSTON IONDON MOSCOW **NEW YORK** PALO ALTO RIYADH WASHINGTON

December 8, 2009

VIA FEDERAL EXPRESS

Judy Hanson Administrator, Permitting & Compliance Division Montana Department of Environmental Quality 1520 E. Sixth Avenue Helena, MT 59620-0901

> Notice of Permit Transfers - ASARCO LLC RE:

Dear Ms. Hanson:

ASARCO LLC, formerly known as ASARCO Incorporated, ("ASARCO"), the Montana Environmental Custodial Trust (the "Trust"), and the Montana Environmental Trust Group, LLC, (the "Trustee") are by this letter providing notice of proposed permit transfers. Pursuant to the terms of the Order and Judgment Approving Consent Decree and Settlement Agreement Regarding the Montana Sites, entered on June 5, 2009 by the United States Bankruptcy Court for the Southern District of Texas, Corpus Christi Division in the Matter of In re: ASARCO LLC, et al., Case No. 05-21207, ASARCO, ASARCO MASTER, INC, and the Trustee, will be entering into an Environmental Custodial Trust Agreement pursuant to which the Trust will acquire, for the benefit of the United States and the State of Montana, certain assets including ASARCO's assets related to its Mike Horse Mine operations; East Helena operations; Iron Mountain Mine, and Black Pine Mine operations. The closing of the transaction is expected to occur on December 9, 2009 (the "Transfer Date").

Except for the East Helena Air Quality Permit No. 2557-12 discussed below, all permits issued by the Montana Department of Environmental Quality related to ASARCO's Mike Horse Mine; East Helena; Iron Mountain Mine, and, Black Pine Mine operations are to be transferred to the Trust, including those listed below, as well as any other permits:

Mike Horse Mine

- 1. General Permit for Storm Water Discharges - Permit No. MTR300157
- 2. Authorization to Discharge Under the Montana Pollutant Discharge Elimination System - Permit No. MT0030031

East Helena

- General Permit for Storm Water Discharges Permit No. MTR000072 1.
- 2. Authorization to Discharge Under the Montana Pollutant Discharge Elimination System - Permit No. MT0030147

<u>Iron Mountain Mine</u> None

Black Pine Mine

- 1. General Permit for Storm Water Discharges Permit No. MTR300080
- 2. Operating Permit Permit No. 00063

Pursuant to Administrative Rule of Montana 17.8.763, ASARCO hereby requests revocation of Air Quality Permit No. 2557-12 (for East Helena).

An agreement between ASARCO and the Trust that contains the transfer date and the parties' agreement regarding transfer of permit responsibility, coverage and liability is enclosed with this letter. The transfer of the permits, and the request for revocation of Air Quality Permit No. 2557-12 is contingent on the closing of the transaction. ASARCO and the Trustee will provide you written notification if the proposed transfer does not occur on the Transfer Date.

Enclosed please find a check in the amount of \$1,000.00. This payment is intended to cover the transfer fees associated with all of the permits. The documents enclosed with this letter contain original signatures by ASARCO, with the exception of the Black Pine Mine Operating Permit Assignment form which will be delivered to MDEQ by a separate delivery, and copies of the Trustee's signatures. Documents containing original signatures by the Trustee will be hand delivered to your office by Ms. Mary Capdeville, Assistant Attorney General, before or on the Transfer Date.

Thank you for your time and consideration of this matter. If you have any questions about the transfer, please contact:

For ASARCO LLC

Lewis T. Putman Milbank 1850 K. Street N.W. Washington, D.C. 20006 Phone: 202-835-7534 For Montana Environmental Trust Group, LLC

c/o Greenfield Environmental Trust Group, Inc.

Cynthia Brooks, President

44 Shattuck Road

Watertown, MA 02472

Phone: 617-448-9762

Sincerely,

Aileen M. Hooks

cc: Bill Kirley

Special Assistant Attorney General Montana Department of Environmental Quality 1100 North Last Chance Gulch Helena, Montana 59601

Mary Capdeville Assistant Attorney General Montana Department of Justice Natural Resource Damage Program 1301 East Lockey Helena, Montana 59620-1425

3739 **ASARCO LLC** JPMORGAN CHASE BANK, N.A. **DEBTOR IN POSSESSION** PHOENIX, ARIZONA 85073 5285 WILLIAMS CIRCLE, SUITE 2000 TUCSON, AZ 85711 2009/12/07 91-2-1221 MONTANA DEPARTMENT OF ENVIRONMENTAL **1,000.00 PAY TO THE ORDER OF_ DOLLARS VOID AFTER 180 DAYS ₾ MONTANA DEPARTMENT OF **ENVIRONMENTAL MEMO** "OO3739" :122100024: 6869326091 3739 **ASARCO LLC DEBTOR IN POSSESSION**

ASARCO LLC DEBTOR IN POSSESSION

3739

TRANSFER AGREEMENT

By the signature of each of their authorized representatives below, ASARCO LLC ("Transferor"), and the Montana Environmental Trust Group, LLC on behalf of the Montana Environmental Custodial Trust ("Transferee"), agree that upon the closing of the transfer expected to occur on December 9, 2009, the permits listed below, and issued by the Montana Department of Environmental Quality ("MDEQ") as well as any other permits issued by the MDEQ and related to Transferor's Mike Horse Mine operations; East Helena operations; Iron Mountain Mine operations, and, Black Pine Operations, to the extent such permits are in effect, will transfer from Transferor to Transferee.

Permits

Mike Horse Mine

- 1. General Permit for Storm Water Discharges Permit No. MTR300157
- 2. Authorization to Discharge Under the Montana Pollutant Discharge Elimination System Permit No. MT0030031

East Helena

- 1. General Permit for Storm Water Discharges Permit No. MTR000072
- 2. Authorization to Discharge Under the Montana Pollutant Discharge Elimination System Permit No. MT0030147

Black Pine Mine

- 1. General Permit for Storm Water Discharges Permit No. MTR300080
- 2. Operating Permit Permit No. 0063

Upon the closing of the transfer, to the extent applicable, all coverage under, and responsibility and liability for compliance with the Permits shall accrue to Transferee. ASARCO and the Montana Environmental Trust Group will provide MDEQ written notification if the proposed transfer does not occur on December 9, 2009.

IN WITNESS WHEREOF, Transferor and Transferee hereto have executed this Transfer Agreement the day and year first above written.

FOR ASARCO LLC

Date: 12-3-2009

Thomas L. Aldrich

Vice President, Environmental Affairs

Date: 12-3-2009

By: S. E. M. Cacesta.
Douglas E. McAllister

Executive Vice President, General Counsel & Secretary

FOR THE MONTANA CUSTODIAL TRUST

Date:	 By:
	Montana Environmental Trust

Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust, Greenfield Environmental Trust Group, Inc, Member

Cynthia Brooks, President

IN WITNESS WHEREOF, Transferor and Transferee hereto have executed this Transfer Agreement the day and year first above written.

FOR ASARCO LLC

Date:	By: Thomas L. Aldrich Vice President, Environmental Affairs
Date:	By: Douglas E. McAllister Executive Vice President, General Counsel & Secretary

FOR THE MONTANA CUSTODIAL TRUST

Date: 12/7/09

Montana Environmental Trust Group, LLC,

Trustee of the Montana Environmental Custodial Trust, Greenfield Environmental Trust Group, Inc, Member, not individually, but solely in the representative capacity as Trustee of the Custodial Trust

Cynthia Brooks, President

ASSIGNMENT **OPERATING PERMITS NO. 00063**

Assignments are not valid until approved by the Department of Environmental Quality. The Department may request proof of agency.

AFFIDAVIT OF ASSIGNOR

State	ΟĬ	Arizona

County of Pima)

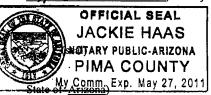
Thomas L. Aldrich (Agent) as Vice President - Environmental Affairs (Title) of ASARCO LLC (Assignor) of 5285 East Williams Circle, Suite 2000 Tucson, AZ 85711 (Address), being duly sworn, avers:

That he/she is a duly authorized agent of assignor, empowered to transfer and assign Operating Permit No. 00063.

That said permit is hereby transferred and assigned to Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually but solely in its representative capacity as Trustee of the ASARCO Montana Custodial Trust (Assignee) of 44 Shattuck Road, Watertown, Massachusetts 02472 (Address).

12-8-09

SUBSCRIBED AND SWORN to before me, the undersigned, a Notary Public for the State of _, the day and year first above-written.



Notary Public for the State of

Residing at Tucson, DZ My Commission Expires 5-27-11

SS.

County of Pima)

Douglas E. McAllister (Agent) as Executive Vice President, General Counsel & Secretary (Title) of ASARCO LLC (Assignor) of 5285 East Williams Circle, Suite 2000 Tucson, AZ 85711 (Address), being duly sworn, avers:

That he/she is a duly authorized agent of assignor, empowered to transfer and assign Operating Permit No. 00063.

That said permit is hereby transferred and assigned to Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually but solely in its representative capacity as Trustee of the ASARCO Montana Custodial Trust (Assignee) of 44 Shattuck Road, Watertown, Massachusetts 02472 (Address).

Assignor Signature

SUBSCRIBED AND SWORN to before me, the undersigned, a Notary Public for the State of ARIZ ora____, the day and year first above-written.

(sea9FFICIAL SEAL JACKIE HAAS NOTARY PUBLIC-ARIZONA PIMA COUNTY My Comm. Exp. May 27, 2011

My Commission Expires <u>5-27-</u>

AFFIDAVIT OF ASSIGNEE

State of)			
County of)			
Cynthia Brooks (Agent) as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, (Title) of Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually but solely in its representative capacity as Trustee of the ASARCO Montana Custodial Trust (Assignee) of 44 Shattuck Road, Watertown, Massachusetts 02472 (Address), being duly sworn, avers:			
That he/she is a duly authorized agent of assignee, empowered to accept the assignment of Operating Permit No. 00063 and bind the assignee as follows:			
That assignee hereby adopts assignor's operating permit and assumes full responsibility under Title 82, Chapter 4, Part 3, MCA for all activities which may have been previously conducted pursuant to said permit and any preceding renewals and amendments.			
That assignee assumes full responsibility uncactivities conducted pursuant to said permit.	der Title 82, Chapter 4, Part 3, MCA for future		
Date	Assignee Signature		
SUBSCRIBED AND SWORN to before me, the undersigned, a Notary Public for the State of, the day and year first above-written.			
(seal)	Notary Public for the State of Residing at My Commission Expires		
	My Commission Expires		
DEQ APPROV	AL OF ASSIGNMENT		
The foregoing assignment of Operational day of	ng Permit No is hereby approved this		
Warren D. McCullough			
Chief, Environmental Management Bureau			

ASSIGNMENT OPERATING PERMITS NO. 00063

Assignments are not valid until approved by the Department of Environmental Quality. The Department may request proof of agency.

AFFIDAVIT OF ASSIGNOR

State of Arizona)	
Ss. County of <u>Pima</u>)	
Thomas L. Aldrich (Agent) as Vice P (Assignor) of 5285 East Williams Circ sworn, avers:	resident - Environmental Affairs (Title) of ASARCO LLC le, Suite 2000, Tucson, Arizona 85711 (Address), being duly
Γhat he/she is a duly authorized ager Permit No. <u>00063</u> .	at of assignor, empowered to transfer and assign Operating
Montana limited liability company, r	and assigned to Montana Environmental Trust Group, LLC, a not individually but solely in its representative capacity as a stodial Trust (Assignee) of 44 Shattuck Road, Watertown,
Assignor Signature	Date
SUBSCRIBED AND SWORN to before, the day	ore me, the undersigned, a Notary Public for the State of and year first above-written.
(seal)	Notary Public for the State of
State of Arizona)	
County of Pima) ss.	
Douglas E. McAllister (Agent) as Exeroscience (Assignor) of 5285 (Address), being duly sworn, avers:	cutive Vice President, General Counsel & Secretary (Title) of East Williams Circle, Suite 2000, Tucson, Arizona 85711
That he/she is a duly authorized ager Permit No. <u>00063</u> .	nt of assignor, empowered to transfer and assign Operating
<u>viontana limited liability company, i</u>	and assigned to Montana Environmental Trust Group, LLC, a not individually but solely in its representative capacity as astodial Trust (Assignee) of 44 Shattuck Road, Watertown,
Assignor Signature	Date
SUBSCRIBED AND SWORN to before, the day	ore me, the undersigned, a Notary Public for the State of y and year first above-written.
(seal)	Notarý Public for the State of

AFFIDAVIT OF ASSIGNEE

		Most indicated	. الم
State of)		Not individue but solely 1 Member	any
Ss.		Mem	45 ****
County of)		7 VEINE	æ;
Cynthia Brooks (Agent) as President, Greenfield Montana Environmental Trust Group, LLC, (Title) of Montana limited liability company, not individual Trustee of the ASARCO Montana Custodial Trust Massachusetts 02472 (Address), being duly sworn,	of Montana Environmental Trailly but solely in its represent	ust Group, LTC, a	
That he/she is a duly authorized agent of assignee, empowered to accept the assignment of Operating Permit No. <u>00063</u> and bind the assignee as follows:			
That assignee hereby adopts assignor's operating permit and assumes full responsibility under Title 82, Chapter 4, Part 3, MCA for all activities which may have been previously conducted pursuant to said permit and any preceding renewals and amendments.			
That assignee assumes full responsibility under Title activities conducted pursuant to said permits 12/7/09	Assignee Signan	ire	ANDREW C. DAVIS Notary Public Commonwealth of Massechusetts My Commission Expires July 25, 2014
(seal)	Notary Public for the State of Residing at		4
DEQ APPROVAL O	F ASSIGNMENT		
The foregoing assignment of Operating Penday of	mit No is hereby appr	oved this	
Warren D. McCullough Chief, Environmental Management Bureau	_		

Notary Signature Witnessing

Cynthia N Brooks
Printed Name Machine
\$ignature
Passport or Drivers License (Circle ID Type & Mark through other)
SS95335920
ID#
MA
Issuing entity
07-26-2010
Exp Date
On This 07th day of December, 2009, before me, the undersigned Notary Public, personally appeared Cynthia N Brooks, who proved to me through satisfactory evidence of identification, which were MA Drivers License, to be the person whose name is signed on the preceding or attached document in my presence
(official signature and seal of Notary)
Notary Seal/Stamp: ANDREW C. DAVIS Notary Public Commonwealth of Massachusetts

Notary wording from Apostilles and Certificates of Appointment; updated on 9/9/08



WATER PROTECTION BUREAU

	Agency Use
	Permit No.:
	Date Rec'd
1	Amount Rec'd
1	Check No.
1	Pac'd Ry

FORM **PTN**

Permit Transfer Notification

Use this form to request a transfer of ownership or change the name (transfer) of the entity that holds a Montana Pollutant Discharge Elimination System (MPDES) permit, Ground Water Pollutant Control System (GWPCS) permit, or permit authorization under a general permit including storm water permits. This form must be submitted at least 30 days prior to the effective date of the proposed transfer and constitutes written notice to the Department under the Montana Water Quality Act that the new owner or operator assumes responsibility and liability for all the terms and conditions in the permit, including permit fees. The Department reserves the right to modify or revoke and reissue the permit and request a new permit application (ARM 17.30.1360(2)).

This form may not be used to transfer permit coverage to a new or different site, facility or location, or modify the terms and conditions of the discharge permit. Until a determination is made, the owner or operator of record remains responsible for compliance with the terms of the permit, including fees and/or violations. Please read the attached instructions before completing this form; do not leave blank spaces. Please type or print; forms that are not legible will be returned.

not legible will be returned.
Section A - Effective Date: Effective Date of Transfer: 12-9-2009
Section B - Facility or Site Information: Permit Number: MT R 0 0 0 0 7 2 Facility or Site Name ASARCO LLC East Helena Smelter Physical Location 100 Smelter Ave. East Helena, MT 59635 Nearest City or Town East Helena, MT
Section C - Current Owner/Operator Information: Owner/Operator Name
Status of Owner/Operator (Check one) Federal State Private Public Other (specify)

Section D - New Owner/Operator Information:		
Montana Custodial Trust, Montana Environmental Trust Group, LLC, not individually but solely in its representative capacity as Trustee of the Montana Environmental Owner or Operator Name Custodial Trust		
Mailing Address 44 Shattuck Road		
City, State, and Zip Code Watertown, MA 02472		
Phone Number (617) 448-9762		
Is the entity listed above the (Check one) Owner or Operator		
Status of Applicant (Check one) Federal State Private Public Other (specify) Trust		
Section E - New Facility Contact Person/Position: Cynthia Brooks not individually but solely in the representative capacity as President, Greenfield		
Contact Person Name and Title, or Position Title		
Mailing Address c/o Luxan & Murfitt, Montana Club Building 24 West Sixth Avenue, P.O. Box 1144		
City, State, and Zip Code Helena, Montana 59624		
Phone Number (617) 448-9762		
Section F – Fees: A \$200 permit transfer fee is due upon submission of this form (ARM 17.30.201).		
Section G – Supplemental Information:		

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

Current Owner/Operator	
A. Name (Type or Print)	
Thomas L. Aldrich	
B. Title (Type or Print)	C. Phone No.
Vice President - Environmental Affairs	5207987749
D. Signature	E. Date Signed
12 1AW	12-3-2009
New Owner/Operator	
A. Name (Type or Print)	- · · · · · · · · · · · · · · · · · · ·
Cynthia Brooks	
B. Title (Type or Print)	C. Phone No.
Not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust	6174489762
D. Signature	E. Date Signed
The Department will not process this form until all of the requested information is suppli	ied, the form is

complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

	5. [. · · · · · · · · · · · · · · · · · ·
Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature D. E Macistu	E. Date Signed 12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
B. Title (Type or Print)	C. Phone No.
D. Signature	E. Date Signed
The Department will not process this form until all of the requested infor complete, and the appropriate fees are paid. Return this form (Form PT)	
Department of Environmental Qua	lity

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature	E. Date Signed
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print) Montana Environmental Trust Group, LLC, a Montana limited liability company not individually, but solely in the representative capacity as Trustee of the Custodial Trust by Greenfield Environmental Trust Group, Inc., not individually but solely as Member, President	1/27 1/12 02/27
D. Signature Hua Hust Group, mo., not more than the state of the state	E. Date Signed
The Department will not process this form until all of the requested information is supply	ied, the form is

complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

INSTRUCTIONS FOR

Form PTN - Permit Transfer Notification

IMPORTANT: The Administrative Rules of Montana (ARM) 17.30.1362(1)(d) and 17.30.1117 provide for transfer of a permit or permit coverage provided that a written agreement containing a specific date of transfer of permit responsibility, coverage, and liability between the current and new permittees has been submitted to the Department. Forms are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: http://www.deq.mt.gov This agreement must be signed and certified by both parties in accordance with ARM 17.30.1323.

Do not leave blank spaces. Please type or print; forms that are not legible will be returned. You must maintain a copy of the completed form for your records.

SPECIFIC ITEM INSTRUCTIONS

Section A – Effective Date:

Enter the date on which the transfer is effective.

Section B – Facility or Site Information:

The facility name means the building, structure (manufacturing, commercial or residential), process, source, or physical site, from which pollutants or wastes, including storm water are, or will be collected, generated, stored, treated (treatment works) or discharged (disposal system). The site name means the land or water area where any facility or activity is physically located or conducted, including other land used in connection with the facility or activity. This information must be identical to the information provided in the facility's permit application, authorization, or confirmation letter of receipt.

Section C - Current Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity to whom the Department issued the current effective permit. The owner or operator is the legal entity that controls the operation of the facility described in Section B. This information must be identical to the information provided in the facility's application for permit, permit authorization or Notice of Intent (NOI).

Section D – New Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity that will assume control of the facility described in Section B after the effective date of transfer. The permit or authorization will be transferred to the entity identified in this Section. This entity assumes responsibility for compliance with the terms and conditions in permit and any fees associated with the permit.

Section E – Facility Contact Person or Position:

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person's position instead of a person's name.

Section G – Supplemental Information:

Use the space provided to expand upon any information requested in the form or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary.



Agency Use		
Permit No.:		
Date Rec'd		
Amount Rec'd		
Check No.		
Rec'd By		

FORM PTN

Permit Transfer Notification

Use this form to request a transfer of ownership or change the name (transfer) of the entity that holds a Montana Pollutant Discharge Elimination System (MPDES) permit, Ground Water Pollutant Control System (GWPCS) permit, or permit authorization under a general permit including storm water permits. This form must be submitted at least 30 days prior to the effective date of the proposed transfer and constitutes written notice to the Department under the Montana Water Quality Act that the new owner or operator assumes responsibility and liability for all the terms and conditions in the permit, including permit fees. The Department reserves the right to modify or revoke and reissue the permit and request a new permit application (ARM 17.30.1360(2)).

This form may not be used to transfer permit coverage to a new or different site, facility or location, or modify the terms and conditions of the discharge permit. Until a determination is made, the owner or operator of record remains responsible for compliance with the terms of the permit, including fees and/or violations. Please read the attached instructions before completing this form; do not leave blank spaces. Please type or print; forms that are not legible will be returned.

Section A - Effective Date: Effective Date of Transfer: 12-9-2009	
Section B - Facility or Site Information: Permit Number: MT R 3 0 0 1 5 7 Facility or Site Name ASARCO LLC Mike Horse Mine Physical Location 15480 Mike Horse Creek Road, Lincoln, MT 59639 Nearest City or Town Lincoln, MT	
Section C - Current Owner/Operator Information: Owner/Operator Name	

Owner or Operator Name Montana Custodial Trust, Montana Environmental Trust Group, LLC, not individually but solely in its representative capacity as Trustee of the Montana Environmental Custodial Trust		
Mailing Address 44 Shattuck Road		
City, State, and Zip Code Watertown, MA 02472		
Phone Number (617) 448-9762		
Is the entity listed above the (Check one) Owner or Operator		
Status of Applicant (Check one) Federal State Private Dublic Other (specify)		
Section E - New Facility Contact Person/Position:		
Contact Person Name and Title, or Position Title Contact Person Name and Title, or Position Title Cynthia Brooks not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust		
Mailing Address <u>c/o Luxan & Murfitt, Montana Club Building</u> 24 West Sixth Avenue P.O. Box 1144		
City, State, and Zip Code Helena, Montana 59624		
Phone Number (617) 448-9762		
Section F – Fees: A \$200 permit transfer fee is due upon submission of this form (ARM 17.30.201).		
Section G – Supplemental Information:		

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

· · · · · · · · · · · · · · · · · · ·	N.
Current Owner/Operator	
A. Name (Type or Print)	
Thomas L. Aldrich	
B. Title (Type or Print)	C. Phone No.
Vice President - Environmental Affairs	5207987749
D. Signature A AM	E. Date Signed
New Owner/Operator	And the second of the second o
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print)	C. Phone No.
Not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust	6174489762
D. Signature	E. Date Signed
The Department will not precess this form until all of the requested information is supply	ied the form is

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

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Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature AE Macacusta	E. Date Signed 12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
B. Title (Type or Print)	C. Phone No.
D. Signature	E. Date Signed
The Department will not process this form until all of the requested information is supplied complete, and the appropriate fees are paid. Return this form (Form PTN), and the applied the supplied in the applied to the supplied to the supp	
Department of Environmental Quality	
Water Protection Bureau	
PO Box 200901	
Helena, MT 59620-0901	
(406) 444-3080	

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
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All Applicants Must Complete the Following Certification:

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Current Owner/Operator	11 20 42 (1 12 10 10 10 10 10 10 10 10 10 10 10 10 10
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature	E. Date Signed
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print) Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually,	C. Phone No.
but solely in the representative capacity as Trustee of the Custodial Trust, by Greenfield Environmental Trust Group, Inc., not individually but as Member, President	617-448-9762
D. Signature	E. Date Signed
14mma 7xuons	12/7/09
The Department will not process this form until all of the requested information is suppli	ed, the form is

Department of Environmental Quality
Water Protection Bureau
PO Box 200901
Helena, MT 59620-0901

complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

(406) 444-3080

INSTRUCTIONS FOR

Form PTN - Permit Transfer Notification

<u>IMPORTANT</u>: The Administrative Rules of Montana (ARM) 17.30.1362(1)(d) and 17.30.1117 provide for transfer of a permit or permit coverage provided that a written agreement containing a specific date of transfer of permit responsibility, coverage, and liability between the current and new permittees has been submitted to the Department. Forms are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: http://www.deq.mt.gov This agreement must be signed and certified by both parties in accordance with ARM 17.30.1323.

Do not leave blank spaces. Please type or print; forms that are not legible will be returned. You must maintain a copy of the completed form for your records.

SPECIFIC ITEM INSTRUCTIONS

Section A – Effective Date:

Enter the date on which the transfer is effective.

Section B - Facility or Site Information:

The facility name means the building, structure (manufacturing, commercial or residential), process, source, or physical site, from which pollutants or wastes, including storm water are, or will be collected, generated, stored, treated (treatment works) or discharged (disposal system). The site name means the land or water area where any facility or activity is physically located or conducted, including other land used in connection with the facility or activity. This information must be identical to the information provided in the facility's permit application, authorization, or confirmation letter of receipt.

Section C – Current Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity to whom the Department issued the current effective permit. The owner or operator is the legal entity that controls the operation of the facility described in Section B. This information must be identical to the information provided in the facility's application for permit, permit authorization or Notice of Intent (NOI).

Section D – New Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity that will assume control of the facility described in Section B after the effective date of transfer. The permit or authorization will be transferred to the entity identified in this Section. This entity assumes responsibility for compliance with the terms and conditions in permit and any fees associated with the permit.

Section E – Facility Contact Person or Position:

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person's position instead of a person's name.

Section G – Supplemental Information:

Use the space provided to expand upon any information requested in the form or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary.



WATER PROTECTION BUREAU

Agency Use	
Permit No.:	
Date Rec'd	
Amount Rec'd	
Check No.	
Rec'd By	

FORM **PTN**

Permit Transfer Notification

Use this form to request a transfer of ownership or change the name (transfer) of the entity that holds a Montana Pollutant Discharge Elimination System (MPDES) permit, Ground Water Pollutant Control System (GWPCS) permit, or permit authorization under a general permit including storm water permits. This form must be submitted at least 30 days prior to the effective date of the proposed transfer and constitutes written notice to the Department under the Montana Water Quality Act that the new owner or operator assumes responsibility and liability for all the terms and conditions in the permit, including permit fees. The Department reserves the right to modify or revoke and reissue the permit and request a new permit application (ARM 17.30.1360(2)).

This form may not be used to transfer permit coverage to a new or different site, facility or location, or modify the terms and conditions of the discharge permit. Until a determination is made, the owner or operator of record remains responsible for compliance with the terms of the permit, including fees and/or violations. Please read the attached instructions before completing this form; do not leave blank spaces. Please type or print; forms that are not legible will be returned.

Section A - Effective D Effective Date of Transfe	
	3 0 0 3 1 SARCO LLC Mike Horse Mine Mike Horse Creek Road, Lincoln, MT 59639
Owner/Operator Name Mailing Address 5285 Ea City, State, and Zip Code	ASARCO LLC ast Williams Circle, Suite 2000 Tucson, AZ8577-7711 (520) 798-7749 or (406) 227-4098
Is the entity listed above	the (Check one) Owner or Operator Check one) Federal State Private Dublic Other (specify)

Section D - New Owner/Operator Information:
Owner or Operator Name Montana Custodial Trust, Montana Environmental Trust Group, LLC, not individually but solely in its representative capacity as Trustee of the Montana
Mailing Address 44 Shattuck Road
City, State, and Zip Code Watertown, MA 02472
Phone Number (617) 448-9762
Is the entity listed above the (Check one) Owner or Operator
Status of Applicant (Check one) Federal State Private Public Other (specify) Trust
Section E - New Facility Contact Person/Position:
Contact Person Name and Title, or Position Title Contact Person Name and Title, or Position Title Cynthia Brooks not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust
Mailing Address c/o Luxan & Murfitt, Montana Club Building, 24 West Sixth Avenue, P.O. Box 1144
City, State, and Zip Code Helena, Montana 59624
Phone Number (617) 448-9762
Section F – Fees: A \$200 permit transfer fee is due upon submission of this form (ARM 17.30.201). Section C – Supplemental Information:
Section G – Supplemental Information:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

Current Owner/Operator	
A. Name (Type or Print)	
Thomas L. Aldrich	
B. Title (Type or Print)	C. Phone No.
Vice President - Environmental Affairs	5207987749
D. Signature	E. Date Signed
1 THU	12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print)	C. Phone No.
Not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust	6174489762
D. Signature	E. Date Signed
The Department will not process this form until all of the requested information is suppli	ied, the form is

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

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- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
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Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature D. E. Mcaecata	E. Date Signed 12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
B. Title (Type or Print)	C. Phone No.
D. Signature	E. Date Signed
The Department will not process this form until all of the requested inform complete, and the appropriate fees are paid. Return this form (Form PTN)	
Department of Environmental Quali	ity
Water Protection Bureau	•
PO Box 200901	
Helena, MT 59620-0901	
(406) 444-3080	

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

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Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature	E. Date Signed
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print) Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually	C. Phone No.
but solely in the representative capacity as Trustee of the Custodial Trust, by Greenfield Environmental Trust Group,Inc., not individually but as Member, President	617-448-9762
D. Signifure 10 . A	E. Date Signed
Cumhua Door	12/7/09

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

INSTRUCTIONS FOR

Form PTN - Permit Transfer Notification

Important: The Administrative Rules of Montana (ARM) 17.30.1362(1)(d) and 17.30.1117 provide for transfer of a permit or permit coverage provided that a written agreement containing a specific date of transfer of permit responsibility, coverage, and liability between the current and new permittees has been submitted to the Department. Forms are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: http://www.deq.mt.gov This agreement must be signed and certified by both parties in accordance with ARM 17.30.1323.

Do **not** leave blank spaces. Please type or print; forms that are not legible will be returned. You must maintain a copy of the completed form for your records.

SPECIFIC ITEM INSTRUCTIONS

Section A – Effective Date:

Enter the date on which the transfer is effective.

Section B - Facility or Site Information:

The facility name means the building, structure (manufacturing, commercial or residential), process, source, or physical site, from which pollutants or wastes, including storm water are, or will be collected, generated, stored, treated (treatment works) or discharged (disposal system). The site name means the land or water area where any facility or activity is physically located or conducted, including other land used in connection with the facility or activity. This information must be identical to the information provided in the facility's permit application, authorization, or confirmation letter of receipt.

Section C – Current Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity to whom the Department issued the current effective permit. The owner or operator is the legal entity that controls the operation of the facility described in Section B. This information must be identical to the information provided in the facility's application for permit, permit authorization or Notice of Intent (NOI).

Section D – New Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity that will assume control of the facility described in Section B after the effective date of transfer. The permit or authorization will be transferred to the entity identified in this Section. This entity assumes responsibility for compliance with the terms and conditions in permit and any fees associated with the permit.

Section E – Facility Contact Person or Position:

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person's position instead of a person's name.

Section G – Supplemental Information:

Use the space provided to expand upon any information requested in the form or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary.



	Agency	Use	
Permit No			
Date Rec'	d		
Amount R	ec'd		
Check No	•		
Rec'd By			
the second of the			

FORM

PTN

Permit Transfer Notification

Use this form to request a transfer of ownership or change the name (transfer) of the entity that holds a Montana Pollutant Discharge Elimination System (MPDES) permit, Ground Water Pollutant Control System (GWPCS) permit, or permit authorization under a general permit including storm water permits. This form must be submitted at least 30 days prior to the effective date of the proposed transfer and constitutes written notice to the Department under the Montana Water Quality Act that the new owner or operator assumes responsibility and liability for all the terms and conditions in the permit, including permit fees. The Department reserves the right to modify or revoke and reissue the permit and request a new permit application (ARM 17.30.1360(2)).

This form may not be used to transfer permit coverage to a new or different site, facility or location, or modify the terms and conditions of the discharge permit. Until a determination is made, the owner or operator of record remains responsible for compliance with the terms of the permit, including fees and/or violations. Please read the attached instructions before completing this form; do not leave blank spaces. Please type or print; forms that are not legible will be returned.

Section A - Effective Date Effective Date of Transfer:	
	0 1 4 7 RCO LLC East Helena Smelter Iter Avenue East Helena, MT 59635
Owner/Operator Name AS Mailing Address 5285 East City, State, and Zip Code Tu	Williams Circle, Suite 2000
•	e (Check one) Owner or Operator eck one) Federal State Private Public Other (specify)

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
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All Applicants Must Complete the Following Certification:

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Current Owner/Operator	
A. Name (Type or Print)	
Thomas L. Aldrich	
B. Title (Type or Print)	C. Phone No.
Vice President - Environmental Affairs	5207987749
D. Signature 1 AUI	E. Date Signed 12.3.2009
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print)	C. Phone No.
Not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC, Trustee of the Montana Environmental Custodial Trust	6174489762
D. Signature	E. Date Signed

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

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including the possibility of time and imprisonment for knowing violations.	[/5-5-055, MCA]
Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature D. E. Malesta	E. Date Signed 12 - 3 - 2009
New Owner/Operator	
A. Name (Type or Print)	
B. Title (Type or Print)	C. Phone No.
D. Signature	E. Date Signed
The Department will not process this form until all of the requested inform complete, and the appropriate fees are paid. Return this form (Form PTN)	
Department of Environmental Quali	ty

Water Protection Bureau
PO Box 200901
Helena, MT 59620-0901
(406) 444-3080

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

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- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
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Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature	E. Date Signed
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print) Montana Environmental Trust Group, LLC, a Montana limited liability company, not individually,	C. Phone No.
but solely in the representative capacity as Trustee of the Custodial Trust, by Greenfield Environmental Trust Group, Inc., not individually but as Member, President	617-448-9762
D. Signature	E. Date Signed
(umthea /Suov	12/7/09
	1.1.0

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

> Department of Environmental Quality Water Protection Bureau PO Box 200901 Helena, MT 59620-0901

(406) 444-3080

INSTRUCTIONS FOR

Form PTN - Permit Transfer Notification

IMPORTANT: The Administrative Rules of Montana (ARM) 17.30.1362(1)(d) and 17.30.1117 provide for transfer of a permit or permit coverage provided that a written agreement containing a specific date of transfer of permit responsibility, coverage, and liability between the current and new permittees has been submitted to the Department. Forms are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: http://www.deq.mt.gov This agreement must be signed and certified by both parties in accordance with ARM 17.30.1323.

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SPECIFIC ITEM INSTRUCTIONS

Section A - Effective Date:

Enter the date on which the transfer is effective.

Section B – Facility or Site Information:

The facility name means the building, structure (manufacturing, commercial or residential), process, source, or physical site, from which pollutants or wastes, including storm water are, or will be collected, generated, stored, treated (treatment works) or discharged (disposal system). The site name means the land or water area where any facility or activity is physically located or conducted, including other land used in connection with the facility or activity. This information must be identical to the information provided in the facility's permit application, authorization, or confirmation letter of receipt.

Section C – Current Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity to whom the Department issued the current effective permit. The owner or operator is the legal entity that controls the operation of the facility described in Section B. This information must be identical to the information provided in the facility's application for permit, permit authorization or Notice of Intent (NOI).

Section D - New Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity that will assume control of the facility described in Section B after the effective date of transfer. The permit or authorization will be transferred to the entity identified in this Section. This entity assumes responsibility for compliance with the terms and conditions in permit and any fees associated with the permit.

Section E – Facility Contact Person or Position:

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person's position instead of a person's name.

Section G – Supplemental Information:

Use the space provided to expand upon any information requested in the form or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary.



WATER PROTECTION BUREAU

Agency Use		
Permit No.:		
Date Rec'd		
Amount Rec'd		
Check No.		
Rec'd By		

FORM **PTN**

Permit Transfer Notification

Use this form to request a transfer of ownership or change the name (transfer) of the entity that holds a Montana Pollutant Discharge Elimination System (MPDES) permit, Ground Water Pollutant Control System (GWPCS) permit, or permit authorization under a general permit including storm water permits. This form must be submitted at least 30 days prior to the effective date of the proposed transfer and constitutes written notice to the Department under the Montana Water Quality Act that the new owner or operator assumes responsibility and liability for all the terms and conditions in the permit, including permit fees. The Department reserves the right to modify or revoke and reissue the permit and request a new permit application (ARM 17.30.1360(2)).

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Section A - Effective Date Effective Date of Transfer	
Section B - Facility or S Permit Number: MT R 3 Facility or Site Name ASA Physical Location Black Pi Nearest City or Town Phil	ARCO LLC Black Pine Mine Pine Mine, Granite County
Owner/Operator Name Mailing Address 5285 Eas City, State, and Zip Code	wner/Operator Information: ASARCO LLC st Williams Circle, Suite 2000 Tucson, AZ 85711-7711 520) 798-7749 or (520) 798-7796
·	he (Check one) ①Owner or ②Operator Check one) ☐ Federal ☐ State ■ Private ☐ Public ☐ Other (specify)

Owner or Operator Name Custodial Trust, Montana Environmental Trust Group, LLC, not individually but solely in its representative capacity as Trustee of the Montana Environmental Custodial Trust
Mailing Address 44 Shattuck Road
City, State, and Zip Code Watertown, MA 02472
Phone Number (617) 448-9762
Is the entity listed above the (Check one) Owner or Operator
Status of Applicant (Check one) Federal State Private Public Other (specify)
Section E - New Facility Contact Person/Position:
Contact Person Name and Title, or Position Title Cynthia Brooks not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, ILC, Trustee of the Montana Environmental Custodial Trust
Mailing Address c/o Luxan & Murfitt, Montana Club Building, 24 West Sixth Avenue, P.O. Box 1144
City, State, and Zip Code Helena, Montana 59624
Phone Number (617) 448-9762
A \$200 permit transfer fee is due upon submission of this form (ARM 17.30.201). Section G – Supplemental Information:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

Current Owner/Operator	Law State
A. Name (Type or Print)	
Thomas L. Aldrich	
B. Title (Type or Print)	C. Phone No.
Vice President - Environmental Affairs	5207987725
D. Signature A JAWA	E. Date Signed 12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
B. Title (Type or Print)	C. Phone No.
Not individually but solely in the representative capacity as President, Greenfield Environmental Trust Group, Inc., Member, Montana Environmental Trust Group, LLC. Trustee of the Montana Environmental Custodial Trust	
D. Signature	E. Date Signed
The Department will not process this form until all of the requested information is supplied	ied the form is

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

mending the possibility of thie and imprisonment for knowing violatio	IIS. [73-3-033, IVICA]
Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No.
Executive Vice President, General Counsel & Secretary	5207987725
D. Signature	E. Date Signed
A E. Mcacister	12-3-2009
New Owner/Operator	
A. Name (Type or Print)	
B. Title (Type or Print)	C. Phone No.
D. Signature	E. Date Signed
The Department will not process this form until all of the requested info	
complete, and the appropriate fees are paid. Return this form (Form P)	(N), and the applicable fee to:

Assignment of Transfer Agreement:

We, the undersigned, agree that upon the effective date given in Section A, that the owner or operator identified in Section D of this form assumes permit responsibility, coverage, and liability, including any applicable permit fee(s) for the subject permit.

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA]

Current Owner/Operator	
A. Name (Type or Print)	
Douglas E. McAllister	
B. Title (Type or Print)	C. Phone No. 5207987725
Executive Vice President, General Counsel & Secretary	
D. Signature	E. Date Signed
·	
New Owner/Operator	
A. Name (Type or Print)	
Cynthia Brooks	
Montana Environmental Trust Group 1.1.C. a Montana limited liability company, not individually	C. Phone No.
B. Title (Type or Print) Workalla Environmental Trust eapacity as Trustee of the Custodial Trust, by Greenfield but solely in the representative capacity as Trustee of the Custodial Trust, by Greenfield Environmental Trust Group, Inc., not individually but as Member, President	617-448-9762
	E. Date Signed
D. Signature	12/7/109
	101.10

The Department will not process this form until all of the requested information is supplied, the form is complete, and the appropriate fees are paid. Return this form (Form PTN), and the applicable fee to:

> Department of Environmental Quality Water Protection Bureau PO Box 200901 Helena, MT 59620-0901

(406) 444-3080

INSTRUCTIONS FOR

Form PTN - Permit Transfer Notification

Important: The Administrative Rules of Montana (ARM) 17.30.1362(1)(d) and 17.30.1117 provide for transfer of a permit or permit coverage provided that a written agreement containing a specific date of transfer of permit responsibility, coverage, and liability between the current and new permittees has been submitted to the Department. Forms are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: http://www.deq.mt.gov This agreement must be signed and certified by both parties in accordance with ARM 17.30.1323.

Do not leave blank spaces. Please type or print; forms that are not legible will be returned. You must maintain a copy of the completed form for your records.

SPECIFIC ITEM INSTRUCTIONS

Section A – Effective Date:

Enter the date on which the transfer is effective.

Section B - Facility or Site Information:

The facility name means the building, structure (manufacturing, commercial or residential), process, source, or physical site, from which pollutants or wastes, including storm water are, or will be collected, generated, stored, treated (treatment works) or discharged (disposal system). The site name means the land or water area where any facility or activity is physically located or conducted, including other land used in connection with the facility or activity. This information must be identical to the information provided in the facility's permit application, authorization, or confirmation letter of receipt.

Section C - Current Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity to whom the Department issued the current effective permit. The owner or operator is the legal entity that controls the operation of the facility described in Section B. This information must be identical to the information provided in the facility's application for permit, permit authorization or Notice of Intent (NOI).

Section D – New Owner or Operator Information:

Give the name as it is legally known of the person, business (partnership, corporation, or trust), state or political subdivision of the state, or other entity that will assume control of the facility described in Section B after the effective date of transfer. The permit or authorization will be transferred to the entity identified in this Section. This entity assumes responsibility for compliance with the terms and conditions in permit and any fees associated with the permit.

Section E – Facility Contact Person or Position:

Give the name, title, and work phone number of a person who is thoroughly familiar with the operation of the facility and with the facts reported in this form, and who can be contacted by the Department for additional information. Those facilities with periodic changes in the contact person may provide the contact person's position instead of a person's name.

Section G – Supplemental Information:

Use the space provided to expand upon any information requested in the form or information you wish to bring to the attention of the reviewer. Attach additional sheets, if necessary.